

AD_____

Award Number: MIPR 0EC5DFM0070

TITLE: Use of VTC to Decrease Lost Work Days and Enhance Force
Protection in Division Mental Health

PRINCIPAL INVESTIGATOR: Brett Schneider

CONTRACTING ORGANIZATION: Walter Reed Army Medical Center
Washington, DC 20307-5001

REPORT DATE: October 2001

TYPE OF REPORT: Final

PREPARED FOR: U.S. Army Medical Research and Materiel Command
Fort Detrick, Maryland 21702-5012

DISTRIBUTION STATEMENT: Approved for Public Release;
Distribution Unlimited

The views, opinions and/or findings contained in this report are those of the author(s) and should not be construed as an official Department of the Army position, policy or decision unless so designated by other documentation.

20011029 042

REPORT DOCUMENTATION PAGE

Form Approved
OMB No. 074-0188

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing this collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503

1. AGENCY USE ONLY (Leave blank)

2. REPORT DATE
October 2001

3. REPORT TYPE AND DATES COVERED
Final (15 Feb 00 - 30 Sep 01)

4. TITLE AND SUBTITLE

Use of VTC to Decrease Lost Work Days and Enhance Force Protection in Division Mental Health

5. FUNDING NUMBERS
MIPR 0EC5DFM0070

6. AUTHOR(S)

Brett Schneider

7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES)

Walter Reed Army Medical Center
Washington, DC 20307-5001

E-Mail:

8. PERFORMING ORGANIZATION
REPORT NUMBER

9. SPONSORING / MONITORING AGENCY NAME(S) AND ADDRESS(ES)

U.S. Army Medical Research and Materiel Command
Fort Detrick, Maryland 21702-5012

10. SPONSORING / MONITORING
AGENCY REPORT NUMBER

11. SUPPLEMENTARY NOTES

12a. DISTRIBUTION / AVAILABILITY STATEMENT

Approved for Public Release; Distribution Unlimited

12b. DISTRIBUTION CODE

13. ABSTRACT (Maximum 200 Words)

14. SUBJECT TERMS

15. NUMBER OF PAGES

6

16. PRICE CODE

17. SECURITY CLASSIFICATION
OF REPORT

Unclassified

18. SECURITY CLASSIFICATION
OF THIS PAGE

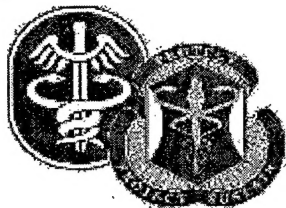
Unclassified

19. SECURITY CLASSIFICATION
OF ABSTRACT

Unclassified

20. LIMITATION OF ABSTRACT

Unlimited



DHP RFS Final Report



Use of VTC to decrease lost work days and enhance force protection in Division Mental Health

Proposal Number: 1999000178

Brett Jay Schneider MD

Abstract

Problems

Logistics- The PI did not arrive at the duty station where the study/project was to be performed until August 2000. His unit was deployed the six months prior to his arrival, making preparation or coordination of the study impossible until his arrival. **Protocol Approval-** There was a lengthy approval process (10 months). **Equipment Purchasing-** There was a difficult acquisition process due to PI's being stationed overseas and needing to work with multiple organizations in Germany and continental US. **Insufficient Funds** also required the PI to obtain additional funding from BSB commanders locally before project could be started. Obtaining approval for this funding was also a lengthy process. **Organizational Coordination-** Numerous military organizations not directly connected with 1st ID, Division Mental Health needed to be briefed regarding the protocol and give support in order to perform the study proposed, this often required multiple meetings, approval from Commanders, and supporting documentation.

Deliverables

The only change from the initial protocol is that funds were available to purchase higher quality VTC equipment for same price as the desktop equipment initially proposed because of the falling cost of VTC equipment.

Expenditures

	3Q FY 00	4Q FY 00	1Q FY 01	2Q FY 01	
Element of Resource (EOR)	Apr 1 - May 31	Jun 1 - Sep 30	Oct 1 - Dec 31	Jan 1 - Mar 31	TOTALS
Travel 2100	0.00	0.00	0.00	1,000.00	1,000.00
Shipping 2200	0.00	0.00	0.00	0.00	0.00
Rent & Communications 2200	0.00	0.00	13,916.00	0.00	13,916.00
Contract for Services 2500	0.00	4,000.00	500.00	0.00	4,500.00
Supplies 2600	0.00	0.00	0.00	0.00	0.00
Equipment 3100	0.00	4,500.00	32,375.00	0.00	36,875.00
GRAND TOTALS	0.00	8,500.00	46,791.00	1,000.00	56,291.00

Financials

Text used to explain any figures entered in the Disbursements Field. Use this to explain any major discrepancies between your funding and the final amount spent on the project or between expenditures outlined in the proposal and the actual expenditures.

Additional funds were required to pay for communication link expenditures. The overseas cost of installing, maintaining and using ISDN lines ultimately cost more than anticipated and required approximately \$5,500 (Approx \$1700/yr) of additional funds per site to maintain the study for the three years approved in the protocol. Also an additional \$500 was needed in personnel costs to pay a civilian psychologist to drive to one site and perform SCID exams during the absence of the military psychologist for five months.

Final Results

Protocol approval was lengthy (10 months);

- Protocol submitted to Local IRB Jun 2000 and Human Use Committee - Local IRB approval Jan 2001 - CIRO approval Jan 2001 - MRMC RCQ approval Apr 2001

Equipment procurement and setting up telecommunications infrastructure was also a lengthy process. Currently, equipment has been received and is being installed and test subjects are being recruited. There is a high potential for using VTC equipment for medication evaluations and diagnostic evaluations AMEDD wide. VTC may also be used for similar applications in peacekeeping missions such as Bosnia or Kosovo.

Projected Costs

To sustain the technology locally would cost approx \$1700/yr for maintaining ISDN lines and paying for use of lines during VTC evaluations.

AMEDD implementation would initially be as follows per site; Personnel (Psychiatrist) AMEDD resource Equipment/site 10,000 Comm Link 5,000 Total \$15,000

Comments

No additional comments.

TATRC Scientific Review

TATRC Acquisition Review

Supporting Graphs/Charts

No Attachments